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Bib Data Sheet

CONFIRMATION NO. 3046

SERIAL NUMBER 10/822,500	FILING DATE 04/12/2004 RULE	CLASS 340	GROUP ART UNIT 2636	ATTORNEY DOCKET NO. MSFT- 2932/306013.01
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APPLICANTS

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**** CONTINUING DATA ******* *None AC*

**** FOREIGN APPLICATIONS ******* *None AC*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 06/22/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>AC</i> Examiner's Signature _____ Initials _____	STATE OR COUNTRY WA	SHEETS DRAWING 8	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 2
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TITLE
 Finding location and ranging explorer

FILING FEE RECEIVED 968	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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